

W035389 Transmittal Number

BRP WM 08A NPDES Stormwater General Permits CEI Notice of Intent for Discharges from Small Municipal Separate

Storm Sewer Systems (MS4s)

Facility ID (if known) 1: 32

A. Instructions

BEHA

Important: When filling out forms on the computer, use only the tab key to move your cursor - do not use the return key.





Submission of this Notice of Intent constitutes notice that the entity named at item B1, of this form intends to be authorized by the DEP General Permit issued jointly with EPA for stormwater discharges from the small municipal separate storm sewer system (MS4), in the location identified at item B2. of this form. Submission of the Notice of Intent also constitutes notice that the party identified at item B1. has read. understands and meets the eligibility conditions of Part I.B. of the NPDES Small MS4 General Permit, agrees to comply with all applicable terms and conditions of the NPDES Small MS4 General Permit, and understands that continued authorization to discharge is contingent on maintaining eligibility for coverage. In order to be granted coverage, all information required on BRP WM 08A, including the Stormwater Management Program Summary and Time Frames form, must be completed. Please read the permit and make sure you comply with all requirements, including the requirement to develop and implement a stormwater management program.

В.	Applicant Information
1.	Small MS4 Operator/Owner Information:
	Tewksbury Hospital, Raymond Sanzone CEO
	Name
	365 East St. Mailing Address
	Tewksbury MA
	City/Town State
	(978) 851-7321 Raymond.sanzome@state.ma.us
	Telephone Number Email (if available)
2.	Municipality Name
	Tewksbury
	City/Town
3.	Legal Status:
	☐ Federal ☐ City/Town ☐ State ☐ Tribal ☐ Private
	Other public entity: Specify Public Entity
4.	Other regulated MS4(s) within municipal boundaries:
	(Tewksbury Hospital is wholly contained within the MS4 of Tewksbury, MA)
5.	Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for "listed species" and critical habitat been met?
	JUL 3 1 2003 MINICIPAL ASSISTANCE UNIT



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B. Applicant Information (cont.	B. Ap	plicant	Informat	ion (cont.
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	Applica										
6.	Based on the instructions provided in Part I of the NPDES Small MS4 General Permit, have the eligibility criteria for protection of historic properties been met?										
	yes	□ pending	□ no								

Note: Section C may be duplicated to accommodate a larger list of receiving waters

Receiving Water:	No. of Outfalls	Listed as Impaired?	Impairment
Strong Water Brook, and unnamed tributaries Name	Exact number TBD, at least 3 Number	⊠ Yes □ No	pathogens Specify
Name	Number	☐ Yes ☐ No	Specify
Name	Number	☐ Yes ☐ No	Specify
Name	Number	☐ Yes ☐ No	Specify
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D. Stormwater Management Program Summary

1. Public Education:

B1-1

BMP ID #

brochure development and distribution

Specify Best Management

Practice

B1-2

BMP ID #

Identify all groups using facility for targeting information, notices.

Specify Best Management Practice

B1-3

BMP ID #

Integrate education and good housekeeping into orientation and yearly training materials

Specify Best Management Practice

Facilities Management and

Facilities Management and

Facilities Management and

Responsible Dept./Person Name

Human Resources

List of groups with contact names **Human Resources** and contact information (to be Responsible Dept./Person Name updated yearly)

groups

Specify Measurable Goal

Human Resources

Responsible Dept./Person Name

All new staff get training materials on hazardous materials. stormwater, as part of orientation. Records kept with personnel files.

Design educational brochure and

distribute to all staff, visting

Specify Measurable Goal

Specify Measurable Goal

B1-4

BMP ID #

Article in Campus Newsletter

Specify Best Management Practice

Facilities Management and **Human Resources**

Responsible Dept./Person Name

One article in the campus bimonthly newsletter introducing the program. To be repeated with updates each year.

Specify Measurable Goal

B1-5

BMP ID #

Guest speaker on stormwater and other environmental issues

Specify Best Management Practice

Facilities Management and Compliance Officer

Responsible Dept./Person Name

One presentation with handouts and/or posters. May be done in coordination with other DPH facilities

Specify Measurable Goal

2. Public Participation:

(There is overlap between items under 1 and 2)

B2-1

BMP ID #

Compile list of existing related activities (several occur on campus regularly each year) Specify Best Management Practice

Facilities Management and **Human Resources**

Responsible Dept./Person Name

List of activities, with organization and contacts

Specify Measurable Goal

B2-2

BMP ID #

Publicize existing environmental/watershed groups

Specify Best Management Practice

Facilities Department and Compliance Officer

Responsible Dept./Person Name

Brochures available in existing locations

Specify Measurable Goal



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D. Stormwater Management Program Summary (Cont.)

BMP ID #

Catch basin Map publication

Specify Best Management Practice

Facilities Department and Human

Resources

Responsible Dept./Person Name

Distribute map showing location and drainage of catch basins

Specify Measurable Goal

B2-4

BMP ID #

Coordinate with town of

Tewksbury

Specify Best Management Practice

Facilities Management andCompliance Officer

Responsible Dept./Person Name

At least one face-to-face meeting with relevant municipal staff on stormwater issues

Specify Measurable Goal

3. Illicit Discharge Detection and Elimination:

B3-1

BMP ID #

Compile maps and other info of existing stormwater systems

Specify Best Management Practice

Facilities Management

Responsible Dept./Person Name

Maps in both large format and standard handout size, showing storm drains, outfalls with outfalls numbered.

Specify Measurable Goal

B3-2

BMP ID #

Develop written SOP defining and forbidding illicit connections

Specify Best Management Practice

Facilities Management and **Human Resources**

Responsible Dept./Person Name

One or more written SOPs in standard facility format

Specify Measurable Goal

B3-3

BMP ID #

Survey of campus buildings for illegal connections

Specify Best Management Practice

Facilities Management

Responsible Dept./Person Name

All buildings checked

Specify Measurable Goal

B3-4

BMP ID #

Repair of any illicit connections discovered (if any are found)

Specify Best Management Practice B3-5

BMP ID #

Survey of non-building areas for illicit connections and control of

illegal dumping

Specify Best Management Practice

Facilities Management

Responsible Dept./Person Name

Full sanitary/storm sewer

separation

Specify Measurable Goal

Facilities Management

Responsible Dept./Person Name

Full sanitary/storm sewer

separation

Specify Measurable Goal

4. Construction Site Runoff Control:

B4-1

BMP ID #

Work with DCAM to develop contract language for new construction

Specify Best Management Practice

Compliance Officer

Responsible Dept./Person Name

Achieve workable contract language to effect stormwater construction control

Specify Measurable Goal

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D. Stormwater Management Program Summary (Cont.)

B4-2

BMP ID #

Develop/implement training for employees who oversee construction activities

Specify Best Management Practice

B4-3

BMP ID#

Review with DCAM use of new contract language and related procedures

Specify Best Management Practice

Human Resources and Facilities Management

Responsible Dept./Person Name

Portion of training program discusses objectives for all relevant staff (See also B1-3)

Specify Measurable Goal

Compliance Officer and Facilities Management

Responsible Dept./Person Name

Memorandum with response to DCAM

Specify Measurable Goal

5. Post Construction Runoff Control: (See also B2-4, B4-1 and B4-3 above and B6-1 and B6-2 below)

B5-1

BMP ID #

Codify maintenance of storm drains and other control measures Specify Best Management Practice

Compliance Officer and Facilities Management

Responsible Dept./Person Name

Written SOPs for procedures and frequency. May also involve use of state CAMIS computerized maintenance management system

Specify Measurable Goal

6. Municipal Good Housekeeping:

B6-1

BMP ID#

Review relevant SOPs and work practices for stormwater management

Specify Best Management Practice

Facilities Management

Responsible Dept./Person Name

All work procedures with relevance to stormwater will be reviewed with changes made as applicable

Specify Measurable Goal

B6-2

BMP ID #

Review all relevant statewide and facility contracts for appropriate language conforming to facility good housekeeping practice (includes waste disposal, vehicle and landscaping contracts)

Specify Best Management Practice

B6-3

BMP ID #

Discussion with town of Tewksbury with potential to adopt some town BMPs

Specify Best Management Practice

Facility Management, Contracting Department and Compliance Officer

Responsible Dept./Person Name

All contracts with potential relevance to stormwater will be reviewed, and changes made as

applicable

Specify Measurable Goal

Compliance Officer

Responsible Dept./Person Name

Meetings and review of documents, potential MOU or similar agreement.

Specify Measurable Goal



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D. Stormwater Management Program Summary (cont.)

B6-4

BMP ID #

Refine procedures to target disposal of horse and other animal waste from site uses

Specify Best Management Practice

Facility Management

Responsible Dept./Person Name

New work procedures and facilities to target these activities and materials

Specify Measurable Goal

B6-5

BMP ID#

Work with on-site farmers on good practices related to agricultural disturbances

Specify Best Management Practice

Facility Management

Responsible Dept./Person Name

New work procedures and facilities to target these activities and materials

Specify Measurable Goal

7. BMPs for Meeting TMDL:

BMPs above, particularly B1-1, B1-2, B1-5, B2-4, all items under Illicit Discharge detection and elimination, and B6-4 and B6-5 will include focus on the elimination of discharges of pathogens to the Shawsheen Watershed.

E. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, I certify that the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

RAYMOND SAHZUNZ

ued Name

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• • •	B6-5	B6-4	B6-3	B6-1	B5-1		B4-3	B4-2	B4-1		B3-5	B3-4	B3-3	B3-2	B3-1	7.7	2 52.3	B2-2	B2-1		B1-5	B1-4	B1-3	81-1	2	BMP						
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